

ROYALTY PHARMA

Royalty Pharma plc

Q2 2025 Financial Results

August 6, 2025

Forward Looking Statements & Non-GAAP Measures

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Also, the discussions during this conference call will include certain financial measures that were not prepared in accordance with U.S. generally accepted accounting principles (“GAAP”). Additional information regarding non-GAAP liquidity measures can be found on slide 20 and in the Company’s earnings release furnished with its Current Report on Form 8-K dated August 6, 2025, which are available on the Company’s website. Any non-GAAP liquidity measures presented are not, and should not be viewed as, substitutes for measures required by GAAP, have no standardized meaning prescribed by GAAP and may not be comparable to the calculation of similar measures of other companies.

Agenda

Key Highlights	Pablo Legorreta	Founder & Chief Executive Officer
Portfolio Update	Marshall Urist	EVP, Head of Research & Investments
Financial Results	Terrance Coyne	EVP, Chief Financial Officer
Conclusion	Pablo Legorreta	Founder & Chief Executive Officer
Q&A	Pablo Legorreta Terrance Coyne Chris Hite Marshall Urist	Founder & Chief Executive Officer EVP, Chief Financial Officer EVP, Vice Chairman EVP, Head of Research & Investments

Key Highlights

Pablo Legorreta

Founder & Chief Executive Officer

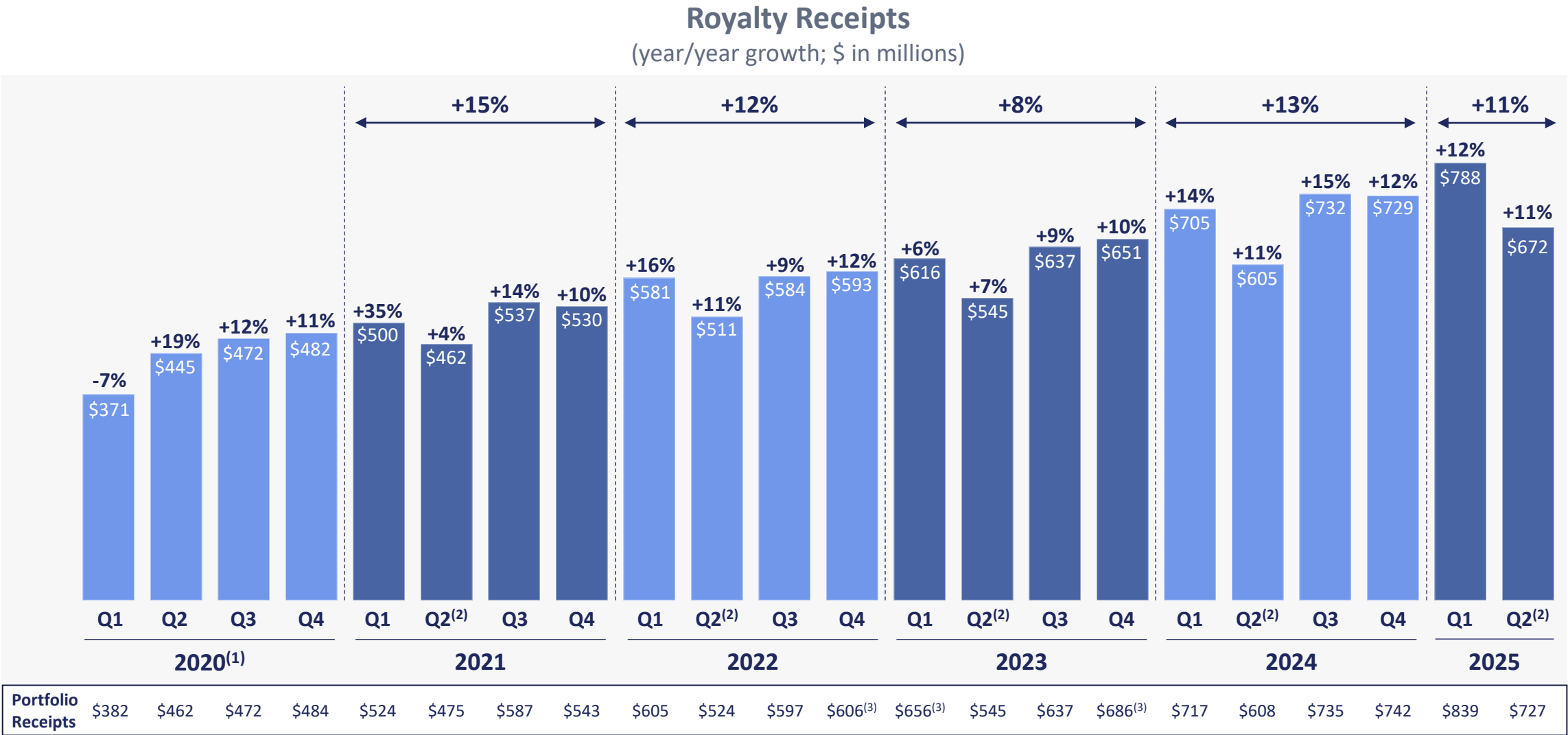
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Sustained strong business momentum in Q2 2025

1	2	3	4
Financial Double-digit growth in Royalty Receipts (+11%) and Portfolio Receipts (+20%) <ul style="list-style-type: none">Royalty Receipts are recurring cash inflowsPortfolio Receipts also include Milestones and other contractual receipts which are more variable	Capital allocation Repurchased 8m shares for \$277m in Q2 2025 <ul style="list-style-type: none">Brings shares repurchased in H1 2025 to \$1bn (31m shares) Capital Deployment of \$595m in Q2 2025	Portfolio Completed acquisition of external manager, RP Management Innovative funding agreement with Revolution Medicines Positive Phase 3 results for Gilead’s Trodelvy in first-line metastatic breast cancer	Financial guidance FY 2025 Portfolio Receipts expected to be \$3,050m to \$3,150m excluding future investments ⁽¹⁾ (\$2,975m to \$3,125m previously) <ul style="list-style-type: none">Growth of ~+9% to +12% (~+6% to +12% previously) FY 2025 operating and professional costs decreases to ~9% to 9.5% of PR (~10% previously) following the internalization

Delivering double-digit growth on average since IPO



1. Growth rates are presented on a pro forma basis. See slide 20 for definition and additional information.
2. Royalty Receipts in the second quarter are typically lower than the first quarter as royalties for certain products or franchises are tiered and typically reset at the beginning of the year. Thus, second quarter Royalty Receipts (reflecting first quarter sales) often include royalties on sales at the lowest royalty tier.
3. The 2022 and 2023 results are calculated on a pro forma basis to exclude Accelerated Receipts (as defined in the Credit Agreement) as if Amendment No. 5 of the Credit Agreement had taken effect on January 1, 2019.

Portfolio Update

Marshall Urist, MD, PhD

Executive Vice President
Head of Research & Investments

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Up to \$2 billion funding partnership with Revolution Medicines

- Acquired a royalty on Revolution Medicines' daraxonrasib, a RAS(ON) multi-selective inhibitor for RAS mutant pancreatic and lung cancers
 - Up to \$1.25bn (\$250m upfront) for mid-single digit daraxonrasib royalty⁽¹⁾
 - Up to \$750m in senior secured debt
- Large Phase 1 study demonstrated efficacy in multiple tumor types exceeding historical chemotherapy benchmarks
 - Phase 3 results expected for metastatic pancreatic cancer in 2026⁽²⁾
 - Enrolling Phase 3 study for metastatic non-small cell lung cancer⁽³⁾
- RP projects multi-blockbuster sales potential and IRR in the teens



**Revolution
Medicines**

**ROYALTY
PHARMA**

*Royalty on daraxonrasib⁽¹⁾ and
interest payments*

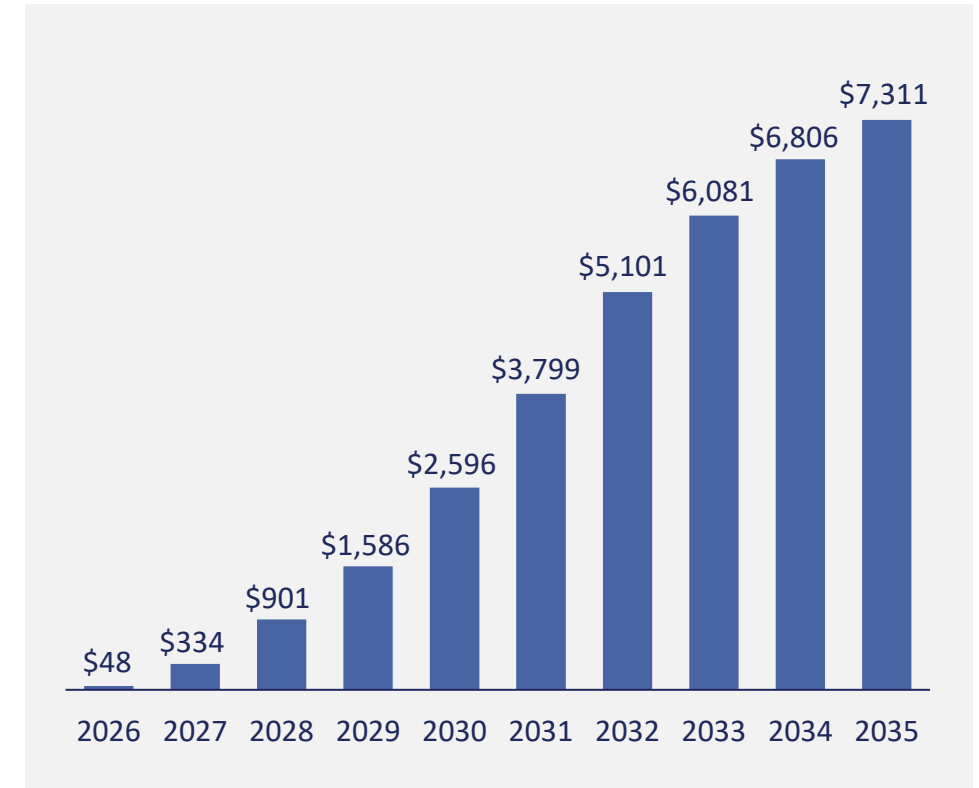
Up to \$2bn of funding

Innovative partnership provides Revolution Medicines substantial capital to pursue independent global commercialization

Flexible deal structure drives “win-win” funding solution

- Daraxonrasib royalty structure provides attractive risk/reward
 - Additional funding available only on positive Phase 3 data, regulatory approvals and achievement of sales thresholds⁽¹⁾
 - Royalties include annual worldwide sales on zoldonrasib once it is approved in an overlapping daraxonrasib indication, strengthening the investment
- Credit facility scales quantum of capital available as Revolution Medicines matures into a commercial stage company
 - Tranched structure available on FDA approval and revenue milestones
 - Flexibility to syndicate all or a portion of this loan with other investors

Daraxonrasib consensus sales projections⁽²⁾
(Unadjusted sales; \$ in millions)



Royalty Pharma sees multi-blockbuster potential for daraxonrasib

Revolution Medicines would launch with a significant first to market advantage in a cancer where the unmet need is profound

Pancreatic cancer⁽¹⁾

~56,000 new U.S. patients/year⁽²⁾

Chemotherapy is the only treatment option

Non-small cell lung cancer

~60,000 new U.S. patients/year⁽²⁾

Chemotherapy is the only second-line treatment option

Additional opportunities

Zoldonrasib⁽³⁾, other RAS-Addicted tumors

Being evaluated in additional tumors and combinations

Financial Results

Terrance Coyne

Executive Vice President
Chief Financial Officer

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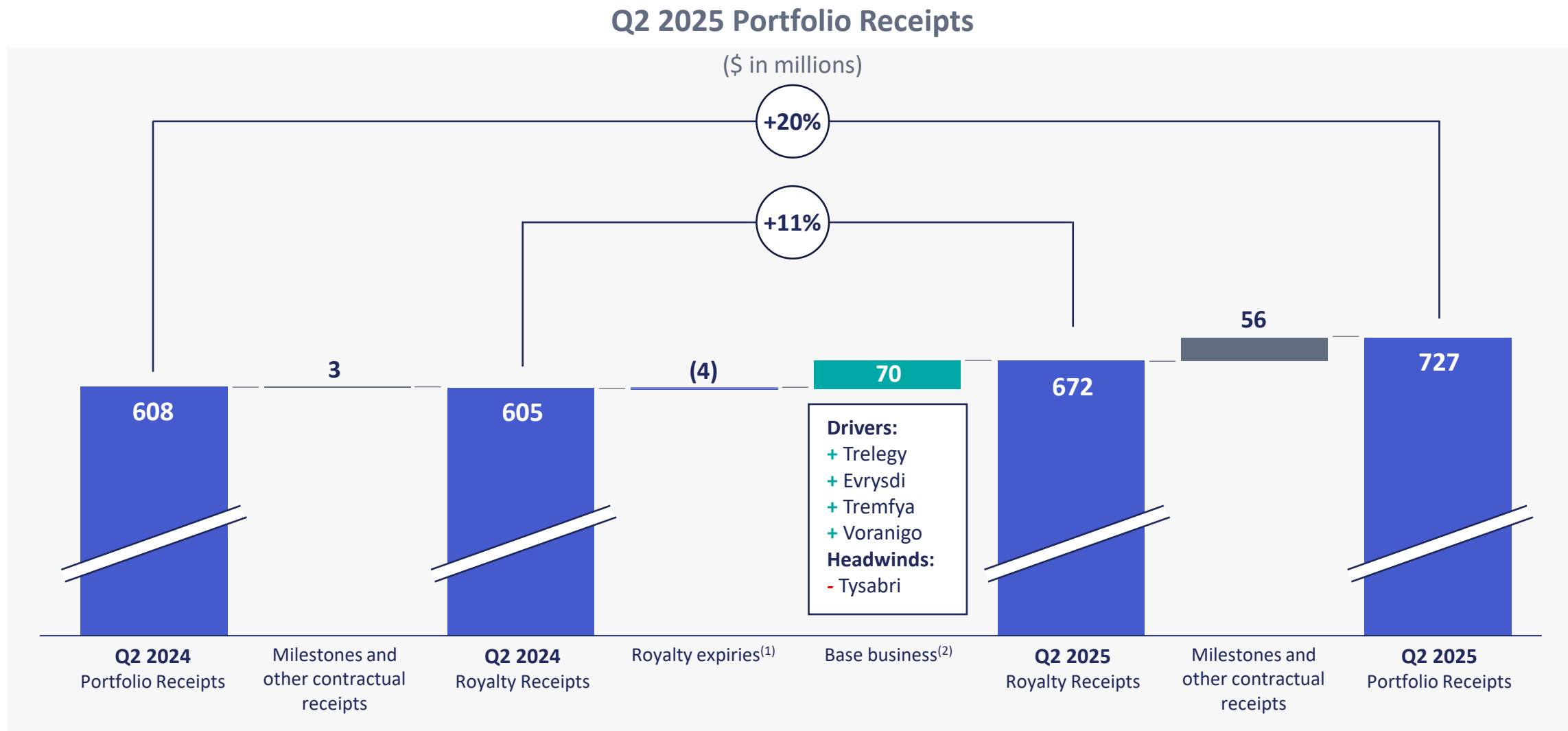


Efficient model generates substantial cash flow to reinvest

\$ in millions	Q2 2025		% Portfolio Receipts	Comments
Royalty Receipts⁽¹⁾	672	+11% YoY		Recurring cash inflows of our royalty portfolio
Milestones & other contractual receipts ⁽¹⁾	56	n/a		More variable cash receipts
Portfolio Receipts	727	+20% YoY		Substantially all cash inflows of the business
Payments for operating and professional costs	-94		12.9%	Includes one-time transaction costs of ~\$35m related to the internalization
Adjusted EBITDA (non-GAAP)	633		87.1%	
Interest received, net	8			
Portfolio Cash Flow (non-GAAP)	641		88.2%	Measure of cash that can be redeployed into new royalties, pay down debt, or returned to shareholders
Capital Deployment	-595			Reflects cash payments during the period for new and previously announced transactions
Share count ⁽²⁾	562			Share count reduced by 35 million from approximately 597 million in Q2 2024

Amounts may not add due to rounding.

Strong growth driven by base business strength in Q2 2025

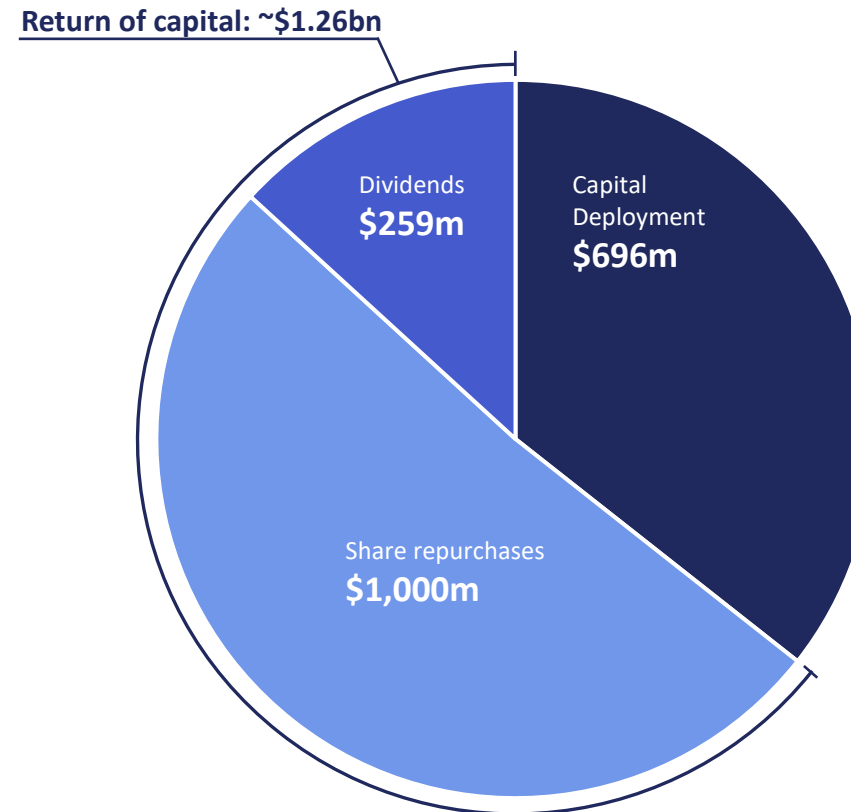


Amounts may not add due to rounding.

Maintaining financial flexibility while returning capital

- \$632m of cash and cash equivalents as of June 30, 2025
 - Monetized MorphoSys Development Funding Bonds in January 2025 for \$511m of cash
- \$8.2bn investment grade debt outstanding
 - Total leverage of 3.0x⁽¹⁾
 - Net leverage of 2.7x⁽²⁾
 - Undrawn \$1.8bn revolving credit facility
- Financial capacity of ~\$3.4 billion with cash on hand and additional leverage⁽³⁾
- Repurchased \$1 billion (~31m shares) in H1 2025

Substantial share repurchases in H1 2025



Full year 2025 guidance^(1,2)

	May 8, 2025	August 6, 2025	Comments
Portfolio Receipts⁽³⁾ excluding transactions announced subsequent to August 6, 2025 ^(1,2)	\$2,975m - \$3,125m (6%-12% growth yr/yr)	\$3,050m - \$3,150m (9%-12% growth yr/yr)	<ul style="list-style-type: none"> • Strong portfolio performance • Milestones and other contractual receipts expected to be ~\$110m in 2025 • Reflects Q2 Promacta generic launch and range of scenarios for launch of Alyftrek and impact of Medicare Part D redesign
Operating & professional costs	~10.0% of Portfolio Receipts	~9.0% - 9.5% of Portfolio Receipts	<ul style="list-style-type: none"> • Reflects H2 2025 savings from extinguishment of the management fee • ~\$70m of one-time expenses (>2% of PR) related to internalization and sale of MorphoSys DFBs
Interest paid	~\$260m	~\$275m	<ul style="list-style-type: none"> • Assumes no issuance of additional debt • Reflects quarterly interest for debt assumed as part of the internalization transaction • Interest paid expected to be \$126m in Q3 and \$8m in Q4 2025 • Excludes interest received, which was \$21m in H1

DFBs: Development Funding Bonds

1. See slide 20 for definitions and for additional information regarding Royalty Pharma's 2025 full-year financial guidance. 2. This guidance is as of August 6, 2025 and assumes no major unforeseen adverse events and excludes any potential contribution from transactions announced subsequent to that date. Furthermore, Royalty Pharma may amend its guidance in the event it engages in new royalty transactions which have a material near-term financial impact on the Company. See the information on slide 3, "Forward Looking Statements & Non-GAAP Measures," for factors that may impact the achievement of this guidance. 3. The MorphoSys Development Funding Bonds proceeds of \$511 million are treated as an asset sale and are not recorded in Portfolio Receipts.

Conclusion

Pablo Legorreta

Founder & Chief Executive Officer

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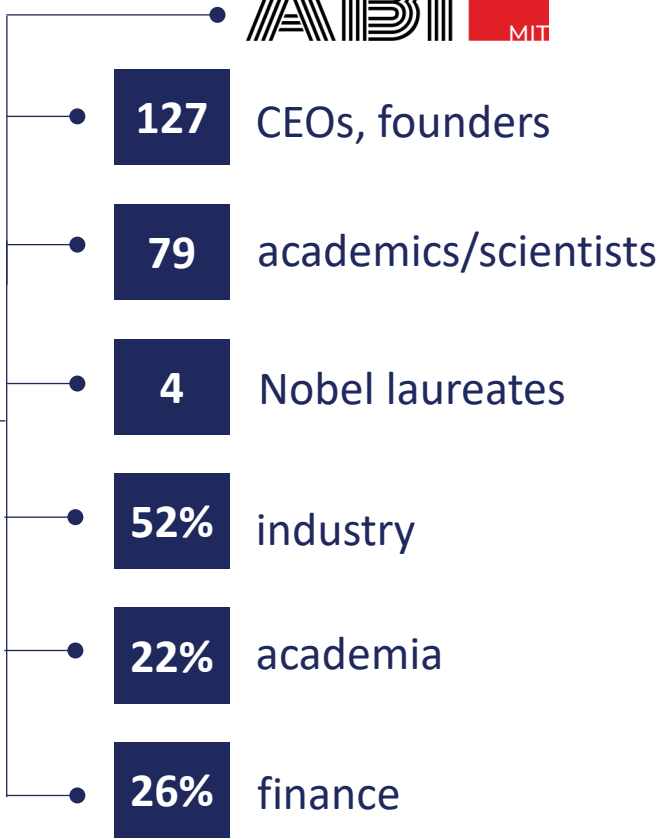
Advancing Royalty Pharma's role in the biopharma ecosystem

5th annual Accelerating Bio-Innovation (ABI) conference – June 2025

Gathering of nearly 350 life science leaders organized in collaboration with the Massachusetts Institute of Technology

Discussions on translational sciences, novel drug development, and financing innovation

3 days of idea-driven interactions to promote cross-sector dialogues and multi-disciplinary collaborations



Investor Day on September 11, 2025

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Event: Investor Day
Date: Thursday, September 11, 2025
Where: New York City
Time: 8:30 a.m. ET

Royalty Pharma senior executives will provide an update on the Company's plans to drive shareholder value creation through leveraging its unique business model and capabilities in the large and growing market for funding biopharma innovation

Footnotes

- 1) To aid in comparability, quarter-over-quarter growth in 2020 is calculated based on pro forma 2019 results, which adjusts certain cash flow line items as if Royalty Pharma's Reorganization Transactions (as described in the Company's final prospectus filed with the SEC on June 17, 2020 ("Prospectus")) and its initial public offering ("IPO") had taken place on January 1, 2019. The most significant difference between the pro forma and reported figures is the non-controlling interest attributable to legacy investors that resulted from the Reorganization Transactions.
- 2) Portfolio Receipts is a key performance metric that represents Royalty Pharma's ability to generate cash from its portfolio investments, the primary source of capital available to deploy to make new portfolio investments. Portfolio Receipts is defined as the sum of Royalty Receipts and milestones and other contractual receipts. Royalty Receipts include variable payments based on sales of products, net of contractual payments to the legacy non-controlling interests, that are attributed to Royalty Pharma ("Royalty Receipts"). Milestones and other contractual receipts include sales-based or regulatory milestone payments and other fixed contractual receipts, net of contractual payments to the legacy non-controlling interests, that are attributed to Royalty Pharma. Portfolio Receipts does not include royalty receipts and milestones and other contractual receipts that were received on an accelerated basis under the terms of the agreement governing the receipt or payment. Portfolio Receipts also does not include proceeds from equity securities or marketable securities, both of which are not central to Royalty Pharma's fundamental business strategy.

Portfolio Receipts is calculated as the sum of the following line items from Royalty Pharma's GAAP condensed consolidated statements of cash flows: *Cash collections from financial royalty assets, Cash collections from intangible royalty assets, Other royalty cash collections, Proceeds from available for sale debt securities and Distributions from equity method investees less Distributions to legacy non-controlling interests - Portfolio Receipts*, which represent contractual distributions of Royalty Receipts and milestones and other contractual receipts to the Legacy Investors Partnerships.

- 3) Adjusted EBITDA is defined under the revolving credit agreement as Portfolio Receipts minus payments for operating and professional costs. Operating and professional costs reflect *Payments for operating and professional costs* from the statements of cash flows. See GAAP to Non-GAAP reconciliation in the Company's Current Report on Form 8-K dated August 6, 2025. See the Company's Annual Report on Form 10-K filed with SEC on February 12, 2025 for additional discussion on defined term.
- 4) Portfolio Cash Flow is defined under the revolving credit agreement as Adjusted EBITDA minus interest paid or received, net. See GAAP to Non-GAAP reconciliation in the Company's Current Report on Form 8-K dated August 6, 2025. See the Company's Annual Report on Form 10-K filed with SEC on February 12, 2025 for additional discussion on defined term.
- 5) Capital Deployment represents the total outflows that will drive future Portfolio Receipts and reflects cash paid at the acquisition date and any subsequent associated contractual payments reflected in the period in which cash was paid.

Capital Deployment is calculated as the summation of the following line items from Royalty Pharma's GAAP condensed consolidated statements of cash flows: *Investments in equity method investees, Purchases of available for sale debt securities, Acquisitions of financial royalty assets, Acquisitions of other financial assets, Milestone payments, Development-stage funding payments*, less *Contributions from legacy non-controlling interests - R&D*.

Financial Guidance footnote

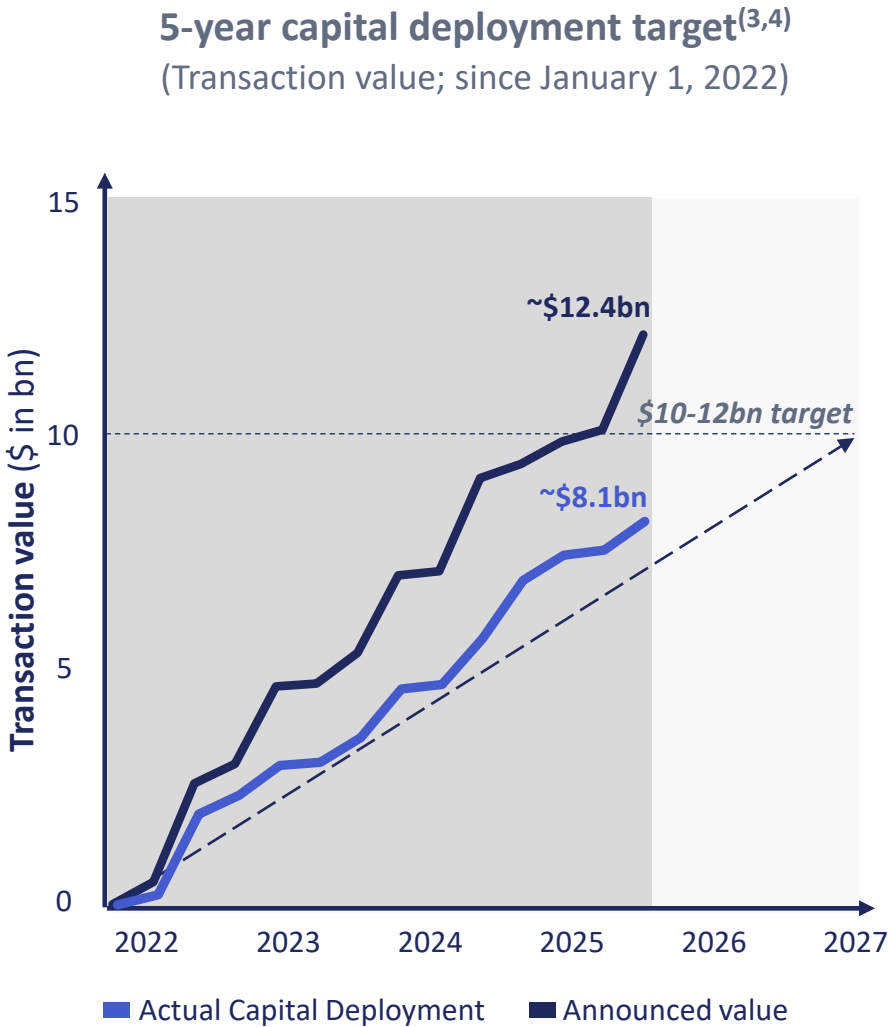
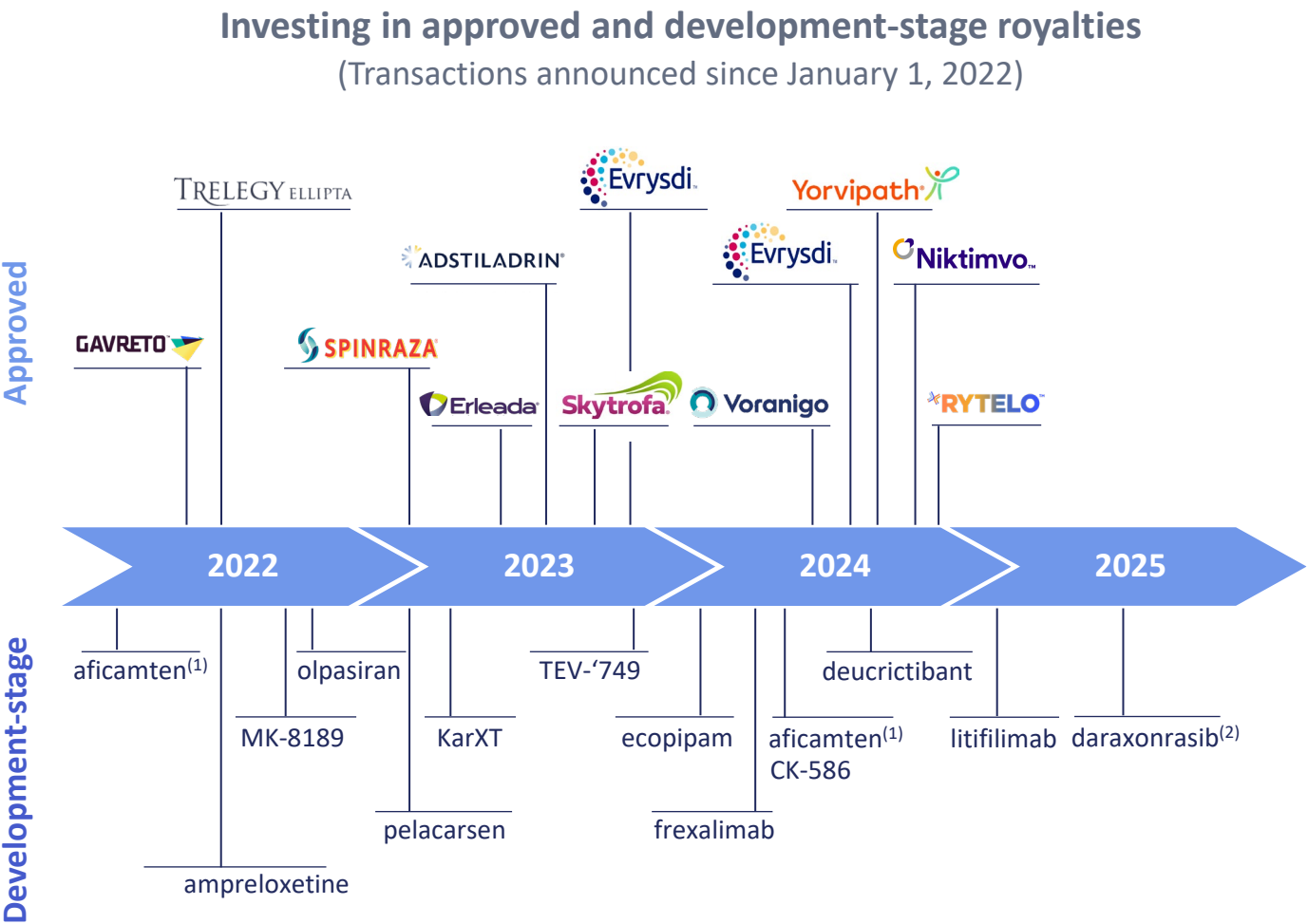
- 6) Royalty Pharma has not reconciled its non-GAAP 2025 guidance to the most directly comparable GAAP measure, net cash provided by operating activities, at this time due to the inherent difficulty in accurately forecasting and quantifying certain amounts that are necessary for such reconciliation, including, primarily, payments for operating and professional costs, distributions from equity method investees, and interest received. The Company is not able to forecast on a GAAP basis with reasonable certainty all adjustments needed in order to project net cash provided by operating activities on a GAAP basis at this time.

Royalty Pharma's long-term outlook is based on its most up-to-date view on its prospects as of May 17, 2022. This long-term outlook assumes no major unforeseen adverse events subsequent to the date of this presentation. Growth outlook includes future royalty acquisitions. Furthermore, Royalty Pharma may amend its long-term outlook in the event it engages in new royalty transactions. See the information on slide 3 "Forward Looking Statements & Non-GAAP Measures," for factors that may impact the long-term outlook.

Appendix

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On track to meet or exceed 5-year capital deployment target



Important events expected over the next 12-18 months

Select recent and expected upcoming events

		2025			2026
		Q2	Q3	Q4	
Clinical	trontinemab Phase 1/2b results for Alzheimer’s disease ⁽¹⁾	✓			
	trontinemab Phase 3 “Go” achieved (TRONTIER 1 and 2) ⁽²⁾	✓			
	Trodelvy, Keytruda Phase 3 results for 1L mTNBC (ASCENT-04) ⁽³⁾	✓			
	Trodelvy Phase 3 results for 1L mTNBC (ASCENT-03) ⁽⁴⁾	✓			
	aficamten Phase 3 results for oHCM compared to metoprolol succinate (MAPLE) ⁽⁵⁾	✓			
	Cobenfy Phase 3 results for adjunctive schizophrenia (ARISE) ⁽⁶⁾	✗			
	Cobenfy Phase 3 results for Alzheimer’s Disease Psychosis (ADEPT-2) ⁽⁷⁾				
	deucrictribant Phase 3 results for hereditary angioedema attacks (RAPIDe-3) ⁽⁸⁾				
	pelacarsen Phase 3 results for cardiovascular disease (HORIZON) ⁽⁹⁾				
	daraxonrasib Phase 3 results for 2L metastatic pancreatic cancer (RASolute 302) ⁽¹⁰⁾				
	litifilimab Phase 3 results for lupus (TOPAZ; AMETHYST) ⁽¹¹⁾				
Regulatory	Tremfya EC approval in ulcerative colitis and Crohn’s disease ⁽¹²⁾	✓			
	aficamten FDA decision in obstructive hypertrophic cardiomyopathy ⁽¹³⁾				

mTNBC: metastatic triple negative breast cancer; oHCM: obstructive hypertrophic cardiomyopathy; EC: European Commission; FDA: Food & Drug Administration

Potential royalties on ~50 projects in late-stage development

	Phase 2		Phase 3			Registration
Initial indication	CK-586 Heart failure	tulimimetostat (CPI-0209) Blood cancer, solid tumors	omecamtiv mecarbil Heart failure	pelacarsen Cardiovascular disease	olpasiran Cardiovascular disease	aficamten oHCM
			trontinemab⁽²⁾ Alzheimer's disease	amprelosetine Symptomatic nOH in MSA	seltorexant MDD w/insomnia symptoms	
			pelabresib Myelofibrosis	ecopipam Tourette syndrome	TEV-'749 Schizophrenia	
			daraxonrasib 2L metastatic pancreatic cancer	litifilimab Lupus (SLE, CLE)	frexalimab Multiple sclerosis	
					deucricitbant (IR) Hereditary angioedema	
Additional indication	Trodelvy (+ combinations) 1L mUC	frexalimab Systemic lupus erythematosus	Trodelvy 1L TNBC (PD-L1-)	Niktimvo (+ steroids) 1L cGvHD	Cobenfy Psychosis in Alzheimer's disease	Spinraza (higher dose) Spinal Muscular Atrophy
	Trodelvy (+ pembrolizumab)⁽¹⁾ 1L mNSCLC	frexalimab Type 1 diabetes	Trodelvy (+ pembrolizumab) Adjuvant TNBC	Trodelvy (+ pembrolizumab) 1L mTNBC (PD-L1+)	Cobenfy Agitation in Alzheimer's disease	Tremfya Pediatric psoriasis
	Trodelvy Lung, HNSCC and endometrial	frexalimab FSGS or MCD	Trodelvy HR+/HER2- chemo-naïve mBC	Trodelvy (+ pembrolizumab)⁽³⁾ 1L mNSCLC	Cobenfy Bipolar I Disorder	Tremfya Pediatric psoriatic arthritis
	Niktimvo (+ Jakafi) 1L cGvHD	Tremfya + golimumab ('4804) Ulcerative colitis, Crohn's disease	Trodelvy 2L+ mEC	Tazverik (+ Revlimid, Rituxan) 2L Follicular lymphoma	Cobenfy Alzheimer's disease cognition	
	Adstiladrin Low-grade UTUC	Niktimvo Idiopathic pulmonary fibrosis	Erleada Localized prostate cancer ⁽⁵⁾	Erleada High risk prostate cancer ⁽⁴⁾	Tremfya PsA Structural Damage	
			Rytelo R/R myelofibrosis	daraxonrasib 2L/3L metastatic NSCLC	aficamten nHCM	
			Adstiladrin Intermediate risk NMIBC	Adstiladrin (+ chemo, pembrolizumab) High risk NMIBC	deucricitbant (XR) Hereditary angioedema	
					salanersen (once-yearly) Spinal Muscular Atrophy	

■ Rare disease ■ Neuroscience
■ Immunology ■ Cardio-Metabolic
■ Cancer

mUC: metastatic urothelial carcinoma; mNSCLC: metastatic non-small-cell lung carcinoma; HNSCC: head and neck squamous cell carcinoma; cGvHD: chronic graft versus host disease; UTUC: upper tract urothelial carcinoma; FSGS: focal segmental glomerulosclerosis; MCD: minimal change disease; TNBC: triple negative breast cancer; mBC: metastatic breast cancer; mEC: metastatic endometrial cancer; R/R: relapsed/refractory; NMIBC: non-muscle invasive bladder cancer; nOH: neurogenic orthostatic hypotension; MSA: multiple system atrophy; SLE: systemic lupus erythematosus; CLE: cutaneous lupus erythematosus; mTNBC: metastatic triple negative breast cancer; nHCM: non-obstructive hypertrophic cardiomyopathy; MDD: major depressive disorder; IR: immediate release; PsA: psoriatic arthritis; XR: extended release; oHCM: obstructive hypertrophic cardiomyopathy
 1. EVOKE-02. 2. Roche plans to initiate a Phase 3 program by the end of 2025. 3. EVOKE-03. 4. High risk localized advanced prostate cancer prior to radical prostatectomy. 5. High risk localized advanced prostate cancer receiving primary radiation therapy.

Daraxonrasib royalty and debt facility terms

Royalty terms	Tranche 1	Tranche 2	Tranche 3 ⁽¹⁾	Tranche 4 ⁽¹⁾	Tranche 5 ⁽¹⁾	Total
Amount	\$250m	\$250m	Up to \$250m	Up to \$250m	Up to \$250m	\$1.25bn
Timing	Immediate	Positive data (RASolute 302)	FDA approval in 2L pancreatic cancer	Sales milestone achievement	Positive Phase 3 data in 1L pancreatic cancer	-
Draw	Required	Required	Revolution Medicines option	Revolution Medicines option	Revolution Medicines option	-
Annual sales: \$0-\$2 billion \$2-\$4 billion \$4-\$8 billion	Royalty tiers: 2.55% ⁽²⁾ 1.50% 0.60%	Royalty tiers: 2.00% ⁽²⁾ 1.00% 0.40%	Royalty tiers: 1.50% 0.80% 0.40%	Royalty tiers: 1.00% 0.75% 0.50%	Royalty tiers: 0.75% 0.50% 0.50%	Royalty tiers: 7.80% ⁽²⁾ 4.55% 2.40%

Credit facility	Tranche 1	Tranche 2	Tranche 3	Total
Amount	\$250m	\$250m	\$250m	\$750m
Timing	On daraxonrasib FDA approval in 2L pancreatic cancer	Sales milestone achievement	Sales milestone achievement	-
Draw	Required	Revolution Medicines option	Revolution Medicines option	-
Terms:	SOFR + 5.75% (3.50% SOFR floor), due 6 years after first tranche funded ⁽³⁾			

FDA: Food and Drug Administration; 1L: first-line; 2L: second-line; SOFR: Secured Overnight Financing Rate

1. Royalty rates will be adjusted pro-rata depending on draw amount.

2. The royalty rate on annual sales of \$0-\$2 billion may increase in the years from 2030 to 2041 in the event that sales in the immediate prior year are below an agreed-upon threshold.

3. Interest only prior to maturity.